



Atty. Dkt. No. 074022-290



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

MAYNARD et al.

Title:

OPTICAL ASSAY DEVICE

AND METHOD

Prior Appl. No.:

09/723,641

Prior Appl. Filing Date: 03/18/1999

Examiner:

Unassigned

Art Unit:

* Unassigned

CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on addressed the date indicated below and is Commissioner for Patents, Washington, D.C. 20231. 112/01 EL452690960US (Express Mail Label Number) (Date of Deposit) odie (Printed Name) (Signature)

CONTINUING PATENT APPLICATION TRANSMITTAL LETTER

Commissioner for Patents **Box PATENT APPLICATION** Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

Continuation

□ Division

Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

Enclosed are:

冈 Specification, Claim(s), and Abstract (38 pages).

X Informal drawings (3 sheets, Figures 1-8).

 \square Preliminary Amendment.

The filing fee is calculated below:

	Claims	Included in		า	Extra				Fee
	as Filed	Basic Fee			Claims	Rate			Totals
Basic Fee							\$710.00		\$710.00
Total Claims:	3	<u>.</u> .	20	=	0	x	\$18.00	=	\$0.00
Independents:	2		3	_ =	0	×	\$80.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$270.00								=	\$270.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed + \$130.00 Declaration and late payment of filing fee								=	\$0.00
	• •		_				SUBTOTAL:	=	\$980.00
[] Small Entity Fees Apply (subtract ½ of above): TOTAL FILING FEE:								=	\$0.00
								=	\$980.00

- \boxtimes A check in the amount of \$980.00 to cover the filing fee is enclosed.
- \boxtimes The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

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